

Figure S1. Immune signature of human PDAC specimens with different patterns of B cell distribution. Heatmap showing gene expression analysis of RNA extracted from paraffin embedded tissue specimens of human PDAC, categorized as TLT^{hi} (n=3) or TILs^{hi} (n=3) after immunohistochemical evaluation with an anti CD20 antibody, and from normal pancreata (n=3) as a control. Sample clustering follows the pattern of B cell distribution (i.e. TLT^{hi} and TILs^{hi} samples segregating together), suggesting that B cell distribution identifies specific gene expression programs. In the dendrogram, the height of vertical lines reflects the distance between the pair of clusters.

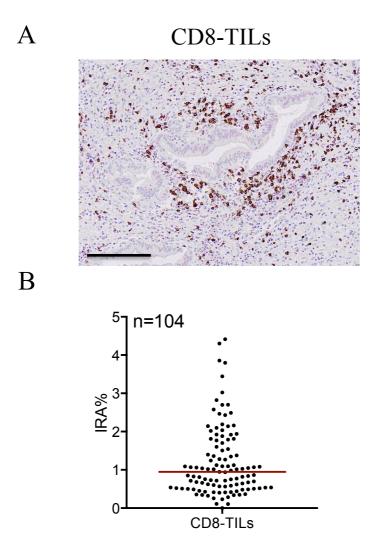
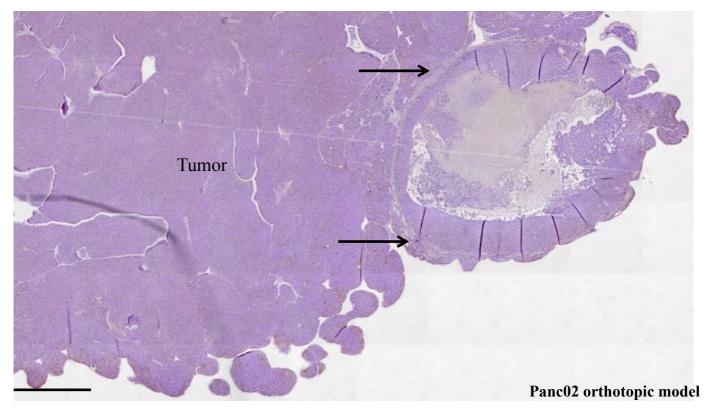


Figure S2. **CD8 T cells in human PDAC.** (**A**) Histological section of human PDAC, stained with an anti-CD8 antibody evidences CD8-TILs at the tumor-stroma interface. (**B**) Distribution of CD8-TIL IRA% across 104 PDAC patients. Bar: 200 μm.



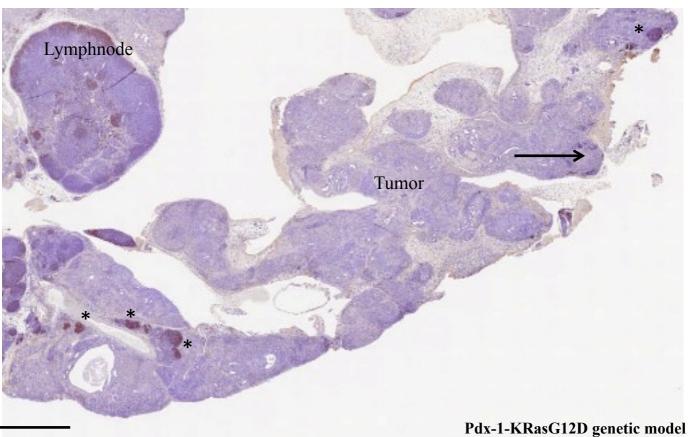


Figure S3. **TLT occurrence in implanted versus genetic PDAC models.** Representative whole slide scans of sections stained with an anti-B220 antibody, from mice orthotopically implanted with PDAC cells (upper panel) and Pdx1-KRasG12D mice spontaneously developing PDAC (lower panel). Arrows indicate B220-TLIs, asterisks indicate B220-TLT (scale bars: 1 mm).

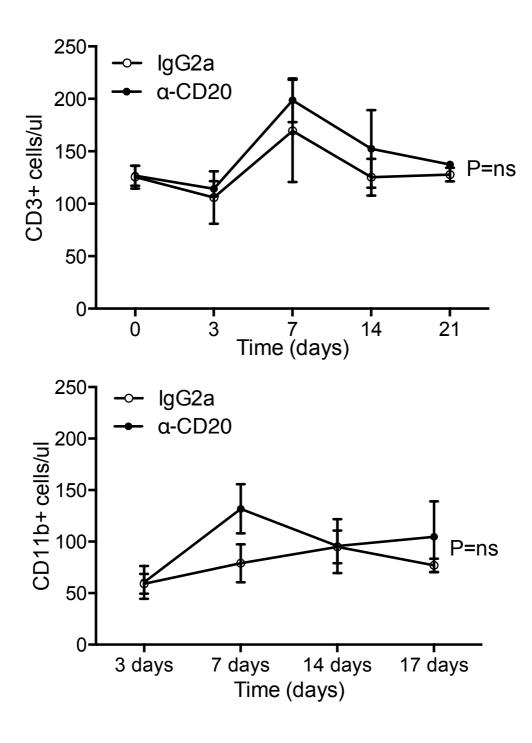


Figure S4. Blood cell counts after α -CD20 treatment. CD3⁺ T cells (upper panel) and CD11b⁺ myeloid cells (lower panel) blood cell counts in IgG2A (n=3) and α -CD20 treated (n=3) mice, at different time points. P value by Students' t test.

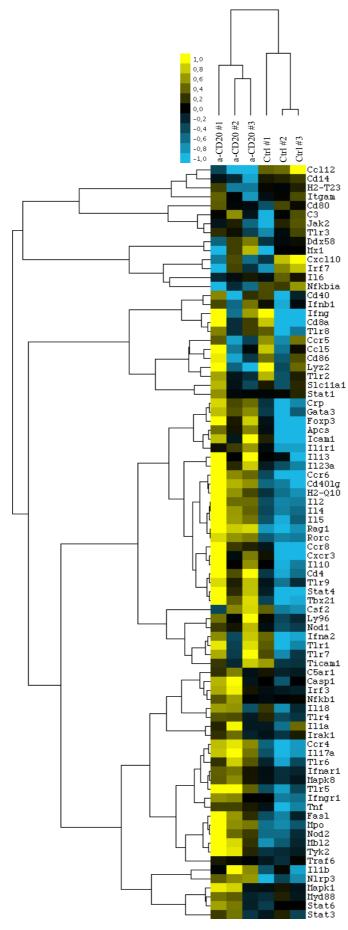


Figure S5. Immune signature of leukocytes from PDAC tumors after α -CD20 treatment. Heatmap showing the immune signature of the leukocyte population isolated from PDAC tumors from control and α -CD20 treated mice. Height of vertical lines in the dendrogram reflects the distance between the pair of clusters.

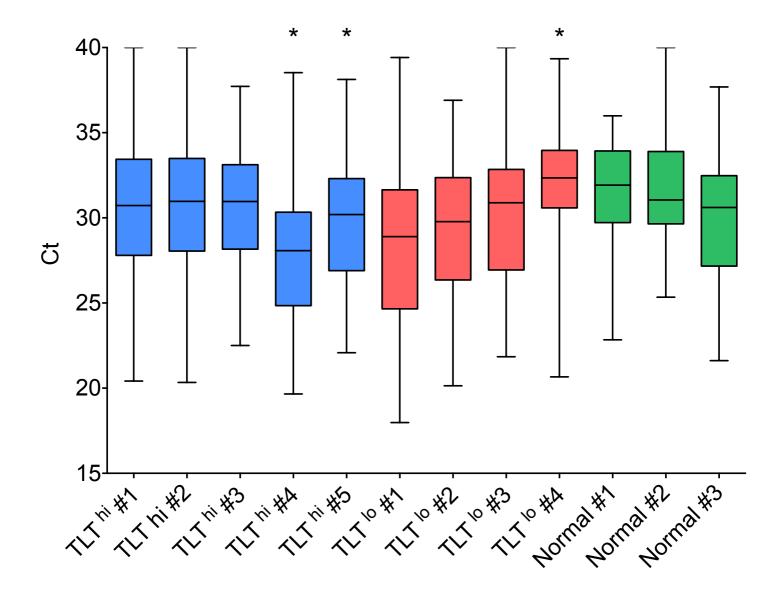


Figure S6. Quality check of RNA from paraffin-embedded tissue specimens. Within a specific group (TLThi, TLTlo), samples with the lowest Ct variability (n=3) were selected for further gene expression analysis. * indicates removed samples.

Table S1. Densities of CD20-TLT, CD20-TILs and CD8-TILs in 104 pancreatic ductal adenocarcinoma.

				CD20-TLT a, b		CD20-TILs ^{a, b}		CD8-TILs ^{a, b}	
		n	(%)	median	P	median	P	median	P
All cases		104	(100)	3.72		0.41		0.61	
Patient demo	graphics								
Age (years) ^c		104	(100)	-	0,170	-	0.086	-	0.432
	Female	54	(51.9)	3.90	Ref	0.38	Ref	0,61	Ref
Gender	Male	50	(48.1)	3.35	0.464	0.44	0.686	0.60	0.502
Tumor fea	itures								
N 11	No	35	(33.6)	3.14	Ref	0,38	Ref	0,44	Ref
Nodal involvement	Yes	67	(64.4)	4.31	0.857	0.45	0.325	0.64	0.187
Local	pT1-pT2	11	(10.6)	3.68	Ref	0,32	Ref	0,41	Ref
Invasion	рТ3-рТ4	91	(87.5)	4.02	0.431	0,43	0.456	0.61	0.375
	G1/ G2	47	(45.2)	4.17	Ref	0.38	Ref	0.57	Ref
Grade ^d	G3/ G4	44	(42.3)	3.53	0.351	0.47	0.816	0.64	0.930
Chemotherap	oy (CTX)								
A 15	No	35	(33.7)	3.83	Ref	0.36	Ref	0.64	Ref
Adjuvant	Yes	69	(66.3)	3.56	0.937	0.43	0.575	0.57	0.310
Neo-	No	90	(86.5)	4.02	Ref	0.41	Ref	0.63	Ref
Adjuvant	Yes	14	(13.5)	2.01	0.200	0.42	0.848	0.39	0.287

 ^a Density is expressed as percent immunoreactive area (IRA%) at the tumor-stroma interface.
^b Linear regression analysis; CD20-TLT, CD20-TIL and CD8-TIL densities were entered as dependent continuous variables.
^c Age was entered as independent continuous variable.
^d G1/G2, well-to moderately differentiated; G3/G4, poorly differentiated.